

PCT

REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving Office use only

International Application No.

International Filing Date

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference
(if desired) (12 characters maximum) LU6160

Box No. I TITLE OF INVENTION Preparation of supported catalysts for polymerization	
Box No. II APPLICANT <input type="checkbox"/> This person is also inventor	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) Basell Polyolefine GmbH Brühler Straße 60 50389 Wesseling	
Telephone No. 0621 60 42411	
Facsimile No. 0621 60 99447	
Teleprinter No.	
Applicant's registration No. with the Office	
State (that is, country) of nationality: DE	State (that is, country) of residence: DE
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input checked="" type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) MIHAN Shahram Am Eichwald 18 65812 Bad Soden Germany	
This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)	
Applicant's registration No. with the Office	
State (that is, country) of nationality: IR	State (that is, country) of residence: DE
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<input checked="" type="checkbox"/> Further applicants and/or (further) inventors are indicated on a continuation sheet.	
Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE	
The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as: <input type="checkbox"/> agent <input type="checkbox"/> common representative	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) Basell Polyolefine GmbH Intellectual Property Industriepark Hoechst – E 413 65926 Frankfurt a.M.	
Telephone No. 069 305 44695	
Facsimile No. 069 305 27441	
Teleprinter No.	
Agent's registration No. with the Office	
<input checked="" type="checkbox"/> Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.	

Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)	
<i>If none of the following sub-boxes is used, this sheet should not be included in the request.</i>	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) WULFF-DÖRING Joachim Hanns-Fey-Str. 4 67227 Frankenthal Germany	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office
State (that is, country) of nationality: DE	State (that is, country) of residence: DE
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) KÖPPL Alexander Albert-Schweitzer-Str. 19 67117 Limburgerhof Germany	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office
State (that is, country) of nationality: DE	State (that is, country) of residence: DE
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) ROHDE Wolfgang Fritz-Ober-Straße 21 67346 Speyer Germany	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office
State (that is, country) of nationality: DE	State (that is, country) of residence: DE
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) (Empty box)	This person is: <input type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office
State (that is, country) of nationality:	State (that is, country) of residence:
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	

☐ Further applicants and/or (further) inventors are indicated on another continuation sheet.

See Notes to the request form

Box No. VIII (iv) DECLARATION: INVENTORSHIP (only for the purposes of the designation of the United States of America)
The declaration must conform to the following standardized wording provided for in Section 214; see Notes to Boxes Nos. VIII, VIII (i) to (iv) (in general) and the specific Notes to Box No. VIII (iv). If this Box is not used, this sheet should not be included in the request.

**Declaration of inventorship (Rules 4.17(iv) and 51bis.1(a)(iv))
 for the purposes of the designation of the United States of America:**

I hereby declare that I believe I am the original, first and sole (if only one inventor is listed below) or joint (if more than one inventor is listed below) inventor of the subject matter which is claimed and for which a patent is sought.

This declaration is directed to the international application of which it forms a part (if filing declaration with application).

This declaration is directed to international application No. PCT/..... (if furnishing declaration pursuant to Rule 26ter).

I hereby declare that my residence, mailing address, and citizenship are as stated next to my name.

I hereby state that I have reviewed and understand the contents of the above-identified international application, including the claims of said application. I have identified in the request of said application, in compliance with PCT Rule 4.10, any claim to foreign priority, and I have identified below, under the heading "Prior Applications," by application number, country or Member of the World Trade Organization, day, month and year of filing, any application for a patent or inventor's certificate filed in a country other than the United States of America, including any PCT international application designating at least one country other than the United States of America, having a filing date before that of the application on which foreign priority is claimed.

Prior Applications: DE 102004006104.1 filed February 6, 2004
 US 60/556273 filed March 24, 2004

I hereby acknowledge the duty to disclose information that is known by me to be material to patentability as defined by 37 C.F.R. § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the PCT international filing date of the continuation-in-part application.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name: Shahram MIHAN

Residence: Germany

(city and either US state, if applicable, or country)

Mailing Address: Am Eichwald 18, 65812 Bad Soden, Germany

Citizenship: Iran

Inventor's Signature: B. Shahram Mihan
 (if not contained in the request, or if declaration is corrected or added under Rule 26ter after the filing of the international application. The signature must be that of the inventor, not that of the agent)

Date: November 22, 2004

(of signature which is not contained in the request, or of the declaration that is corrected or added under Rule 26ter after the filing of the international application)

Name: Joachim WULFF-DÖRING

Residence: Germany

(city and either US state, if applicable, or country)

Mailing Address: Hanns-Fey-Str. 4, 67227 Frankenthal, Germany

Citizenship: German

Inventor's Signature: Joachim Wulff-Döring
 (if not contained in the request, or if declaration is corrected or added under Rule 26ter after the filing of the international application. The signature must be that of the inventor, not that of the agent)

Date: November 22, 2004

(of signature which is not contained in the request, or of the declaration that is corrected or added under Rule 26ter after the filing of the international application)

☒ This declaration is continued on the following sheet, "Continuation of Box No. VIII (iv)".

Continuation of Box No. VIII (i) to (v) DECLARATION

If the space is insufficient in any of Boxes Nos. VIII (i) to (v) to furnish all the information, including in the case where more than two inventors are to be named in Box No. VIII (iv), in such case, write "Continuation of Box No. VIII ..." (indicate the item number of the Box) and furnish the information in the same manner as required for the purposes of the Box in which the space was insufficient. If additional space is needed in respect of two or more declarations, a separate continuation box must be used for each such declaration. If this Box is not used, this sheet should not be included in the request.

Name: Alexander Köppl

Residence: Germany

(city and either US state, if applicable, or country)

Mailing Address: Albert-Schweizer-Str. 19, 67117 Limburgerhof, Germany

Citizenship: German

Inventor's Signature:  **Date:** November 22, 2004

(if not contained in the request, or if declaration is corrected or added under Rule 26ter after the filing of the international application. The signature must be that of the inventor, not that of the agent)

(of signature which is not contained in the request, or of the declaration that is corrected or added under Rule 26ter after the filing of the international application)

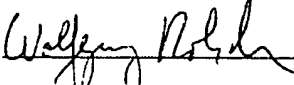
Name: Wolfgang Rohde

Residence: Germany

(city and either US state, if applicable, or country)

Mailing Address: Fritz-Ober-Str. 21, 67346 Speyer, Germany

Citizenship: German

Inventor's Signature:  **Date:** November 22, 2004

(if not contained in the request, or if declaration is corrected or added under Rule 26ter after the filing of the international application. The signature must be that of the inventor, not that of the agent)

(of signature which is not contained in the request, or of the declaration that is corrected or added under Rule 26ter after the filing of the international application)

Name:

Residence:

(city and either US state, if applicable, or country)

Mailing Address:

Citizenship:

Inventor's Signature: _____ **Date:** _____

(if not contained in the request, or if declaration is corrected or added under Rule 26ter after the filing of the international application. The signature must be that of the inventor, not that of the agent)

(of signature which is not contained in the request, or of the declaration that is corrected or added under Rule 26ter after the filing of the international application)

Name:

Residence:

(city and either US state, if applicable, or country)

Mailing Address:

Citizenship:

Inventor's Signature: _____ **Date:** _____

(if not contained in the request, or if declaration is corrected or added under Rule 26ter after the filing of the international application. The signature must be that of the inventor, not that of the agent)

(of signature which is not contained in the request, or of the declaration that is corrected or added under Rule 26ter after the filing of the international application)

Box No. IX CHECK LIST; LANGUAGE OF FILING																																																							
<p>This international application contains:</p> <p>(a) in paper form, the following number of sheets:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">request (including declaration sheets) :</td> <td style="width: 20%; text-align: right;">6</td> </tr> <tr> <td>description (excluding sequence listing and/or tables related thereto) :</td> <td style="text-align: right;">42</td> </tr> <tr> <td>claims :</td> <td style="text-align: right;">3</td> </tr> <tr> <td>abstract :</td> <td style="text-align: right;">1</td> </tr> <tr> <td>drawings :</td> <td></td> </tr> <tr> <td>Sub-total number of sheets :</td> <td style="text-align: right;">52</td> </tr> <tr> <td>sequence listing :</td> <td></td> </tr> <tr> <td>tables related thereto :</td> <td></td> </tr> <tr> <td colspan="2"><i>(for both, actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (c) below)</i></td> </tr> <tr> <td>Total number of sheets :</td> <td style="text-align: right;">52</td> </tr> </table> <p>(b) <input type="checkbox"/> only in computer readable form (Section 801(a)(i))</p> <p>(i) <input type="checkbox"/> sequence listing</p> <p>(ii) <input type="checkbox"/> tables related thereto</p> <p>(c) <input type="checkbox"/> also in computer readable form (Section 801(a)(ii))</p> <p>(i) <input type="checkbox"/> sequence listing</p> <p>(ii) <input type="checkbox"/> tables related thereto</p> <p>Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained the</p> <p><input type="checkbox"/> sequence listing:</p> <p><input type="checkbox"/> tables related thereto:</p> <p><i>(additional copies to be indicated under items 9(ii) and/or 10(ii), in right column)</i></p>	request (including declaration sheets) :	6	description (excluding sequence listing and/or tables related thereto) :	42	claims :	3	abstract :	1	drawings :		Sub-total number of sheets :	52	sequence listing :		tables related thereto :		<i>(for both, actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (c) below)</i>		Total number of sheets :	52	<p>This international application is accompanied by the following item(s) (mark the applicable check-boxes below and indicate in right column the number of each item):</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1. <input checked="" type="checkbox"/> fee calculation sheet</td> <td style="width: 20%; text-align: right;">1</td> </tr> <tr> <td>2. <input type="checkbox"/> original separate power of attorney</td> <td></td> </tr> <tr> <td>3. <input type="checkbox"/> original general power of attorney</td> <td></td> </tr> <tr> <td>4. <input checked="" type="checkbox"/> copy of general power of attorney; reference number, if any:</td> <td style="text-align: right;">1</td> </tr> <tr> <td>5. <input type="checkbox"/> statement explaining lack of signature</td> <td></td> </tr> <tr> <td>6. <input checked="" type="checkbox"/> priority document(s) identified in Box No. VI as item(s):</td> <td style="text-align: right;">2</td> </tr> <tr> <td>7. <input type="checkbox"/> translation of international application into (language):</td> <td></td> </tr> <tr> <td>8. <input type="checkbox"/> separate indications concerning deposited microorganism or other biological material</td> <td></td> </tr> <tr> <td>9. <input type="checkbox"/> sequence listing in computer readable form (indicate type and number of carriers)</td> <td></td> </tr> <tr> <td> (i) <input type="checkbox"/> copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application) :</td> <td></td> </tr> <tr> <td> (ii) <input type="checkbox"/> (only where check-box (b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter :</td> <td></td> </tr> <tr> <td> (iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the sequence listing mentioned in left column :</td> <td></td> </tr> <tr> <td>10. <input type="checkbox"/> tables in computer readable form related to sequence listing (indicate type and number of carriers)</td> <td></td> </tr> <tr> <td> (i) <input type="checkbox"/> copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application) :</td> <td></td> </tr> <tr> <td> (ii) <input type="checkbox"/> (only where check-box (b)(ii) or (c)(ii) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quater) :</td> <td></td> </tr> <tr> <td> (iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the tables mentioned in left column :</td> <td></td> </tr> <tr> <td>11. <input type="checkbox"/> other (specify):</td> <td></td> </tr> </table>	1. <input checked="" type="checkbox"/> fee calculation sheet	1	2. <input type="checkbox"/> original separate power of attorney		3. <input type="checkbox"/> original general power of attorney		4. <input checked="" type="checkbox"/> copy of general power of attorney; reference number, if any:	1	5. <input type="checkbox"/> statement explaining lack of signature		6. <input checked="" type="checkbox"/> priority document(s) identified in Box No. VI as item(s):	2	7. <input type="checkbox"/> translation of international application into (language):		8. <input type="checkbox"/> separate indications concerning deposited microorganism or other biological material		9. <input type="checkbox"/> sequence listing in computer readable form (indicate type and number of carriers)		(i) <input type="checkbox"/> copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application) :		(ii) <input type="checkbox"/> (only where check-box (b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter :		(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the sequence listing mentioned in left column :		10. <input type="checkbox"/> tables in computer readable form related to sequence listing (indicate type and number of carriers)		(i) <input type="checkbox"/> copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application) :		(ii) <input type="checkbox"/> (only where check-box (b)(ii) or (c)(ii) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quater) :		(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the tables mentioned in left column :		11. <input type="checkbox"/> other (specify):	
request (including declaration sheets) :	6																																																						
description (excluding sequence listing and/or tables related thereto) :	42																																																						
claims :	3																																																						
abstract :	1																																																						
drawings :																																																							
Sub-total number of sheets :	52																																																						
sequence listing :																																																							
tables related thereto :																																																							
<i>(for both, actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (c) below)</i>																																																							
Total number of sheets :	52																																																						
1. <input checked="" type="checkbox"/> fee calculation sheet	1																																																						
2. <input type="checkbox"/> original separate power of attorney																																																							
3. <input type="checkbox"/> original general power of attorney																																																							
4. <input checked="" type="checkbox"/> copy of general power of attorney; reference number, if any:	1																																																						
5. <input type="checkbox"/> statement explaining lack of signature																																																							
6. <input checked="" type="checkbox"/> priority document(s) identified in Box No. VI as item(s):	2																																																						
7. <input type="checkbox"/> translation of international application into (language):																																																							
8. <input type="checkbox"/> separate indications concerning deposited microorganism or other biological material																																																							
9. <input type="checkbox"/> sequence listing in computer readable form (indicate type and number of carriers)																																																							
(i) <input type="checkbox"/> copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application) :																																																							
(ii) <input type="checkbox"/> (only where check-box (b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter :																																																							
(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the sequence listing mentioned in left column :																																																							
10. <input type="checkbox"/> tables in computer readable form related to sequence listing (indicate type and number of carriers)																																																							
(i) <input type="checkbox"/> copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application) :																																																							
(ii) <input type="checkbox"/> (only where check-box (b)(ii) or (c)(ii) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quater) :																																																							
(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the tables mentioned in left column :																																																							
11. <input type="checkbox"/> other (specify):																																																							
<p>Figure of the drawings which should accompany the abstract:</p>	<p>Language of filing of the international application: English</p>																																																						
<p>Box No. X SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE</p> <p><i>Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).</i></p>																																																							
<p>Basell Polyolefine GmbH</p> <p><u>Wagner</u></p> <p>Wagner</p> <p>AV-Nr. 39356 01. Feb. 2005</p>	<p><u>Shahram Mihan</u></p> <p>Shahram Mihan</p> <p><u>Alexander Kppl</u></p> <p>Alexander Kppl</p>	<p><u>Joachim Wulff-Böring</u></p> <p>Joachim Wulff-Böring</p> <p><u>Wolfgang Rohde</u></p> <p>Wolfgang Rohde</p>																																																					

For receiving Office use only	
<p>1. Date of actual receipt of the purported international application:</p>	<p>2. Drawings:</p> <p><input type="checkbox"/> received:</p> <p><input type="checkbox"/> not received:</p>
<p>3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:</p>	
<p>4. Date of timely receipt of the required corrections under PCT Article 11(2):</p>	
<p>5. International Searching Authority (if two or more are competent): ISA /</p>	<p>6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid</p>
For International Bureau use only	
<p>Date of receipt of the record copy by the International Bureau:</p>	